Allergan Docket No. 17571 US Patent Application Serial No. 614,408

> DOCKET NO. 17571(AP) **PATENT**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of Boix.

Customer No.: 051957

Serial No: 10/614,408

Conf. No.: 4873 Filed: July 2, 2003

For METHOD OF STERILIZATION OF

POLYMERIC MICROPARTICLES

Group Art Unit: 1618

Examiner: Eric E. Silverman

Commissioner for Patents Alexandria, VA 22313-1450

TRANSMITTAL SHEET

Sir:

Transmitted herewith is an amendment for filing in the above-identified application. Enclosed are:

- Amendment (7 pgs.) 1)
- 2) Transmittal Sheet
- 3) Request for One (1) Month Extension of Time for Response
- 4) Return/Stamped Postcard

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Mail Stop Amendment - Non-Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

January 5, 2009 (Date of Deposit)

January 5, 2009

Date of Signature

Robert J. Baran

Name of person mailing correspondence

Signature

Docket No. 17571

Serial No. 10/614,408

Docket No. 17571 (AP) Serial No. 10/614,408

The fee has been calculated as shown below:

CLAIMS AS FILED

FOR	CLAIMS REMAINING AFTER AMENDMENT	HICHEST NO. PREVIOUSLY PAID-FOR		ESENT TRA	•	RATE	ADDITIONAL FEE
Total Claims	12	80	=	-0-	×	\$52.00	\$0.00
Independent Claims	3	3	=	- 0 -	×	\$200.00	\$0.00
If application contains any then add	multiple depend	dent claims,	=	-0-		\$360.00	\$0.00
Terminal Disclaimer Fee:	-	- 0 -	x	\$110.0	0	=	\$0.00
Request for Continued Examin	nation (RCE)					\$790.0	\$0.00
	TOTAL ADD	ITIONAL FEE FOR	THI	S AME	NDME	NT	\$.00.00

- If the entry in Col. A is less than the entry in Col. B, write "0" in Col.
- If the highest number previously paid for IN THIS SPACE is less than 20, write "20" in this space
- If the highest number previously paid for IN YHIS SPACE is less than 3, write "3" in this space
- () A check in the amount of \$* is enclosed (place fee in here i.e., petition, excess claims, etc.)
- (x) The Commissioner is hereby authorized to charge fees under 37 CFR 1.16 and 1.17 (associated with petition fees or excess claim fees) which may be required, or credit any overpayment to Deposit Account No. 01-0885. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

Date: January 5, 2009

Signature:

Registration No. 25,806

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